



BIR Form No. 2316 Certificate of Compensation Payment/Tax Withheld For Compensation Payment With or Without Tax Withheld

Fill in all applicable spaces. Mark all appropriate boxes with an "X".

Part I - Employee Information: 1 For the Year (YYYY) 2024; 3 Taxpayer Identification No. 277 058 594 000; 4 Employee's Name Cabahug, Rhona; 5 RDO Code; 6 Registered Address 25 c U Alviola Street Cebu City Cebu Cebu City; 6A Zip Code 6000; 6B Local Home Address; 6C Zip Code; 6D Foreign Address; 7 Date of Birth (MM/DD/YYYY) 04 01 1972; 8 Contact Number; 9 Statutory Minimum Wage rate per day; 10 Statutory Minimum Wage rate per month; 11 Minimum Wage Earner whose compensation is exempt from withholding tax and not subject to income tax.

Part II - Employer Information (Present): 12 Taxpayer Identification No. 211 451 592; 13 Employer's Name Alorica Philippines, Inc.; 14 Registered Address 2258 EDSA corner Chino Roces Avenue Makati City; 14A Zip code; main employer secondary employer.

Part III - Employer Information (Previous): 16 Taxpayer Identification No.; 17 Employer's Name; 18 Registered Address; 20A Zip code.

Part IV - Summary: 19 Gross Compensation Income from Present Employer (Sum of Items 36 and 50) 7,742.98; 20 Less: Total Non-Taxable/Exempt Compensation Income from Present Employer (From Item 36) 1,923.36; 21 Taxable Compensation Income from Present Employer (Item 19 Less Item 20) (From Item 50) 5,819.62; 22 Add: Taxable Compensation Income from Previous Employer, if applicable 0.00; 23 Gross Taxable Compensation Income (Sum of Items 21 and 22) 5,819.62; 24 Tax Due 0.00; 25 Amount of taxes Withheld 25A Present Employer 0.00; 25B Previous Employer, if applicable 0.00; 26 Total Amount of Taxes Withheld As Adjusted (Sum of Items 25A and 25B) 0.00; Part IV-B Details of Compensation Income & Tax Withheld from Present Employer: A. NON-TAXABLE/EXEMPT COMPENSATION INCOME: 27 Basic Salary (including the exempt P250,000 & below) or the Statutory Minimum Wage of the MWE; 28 Holiday Pay (MWE); 29 Overtime Pay (MWE); 30 Night Shift Differential (MWE); 31 Hazard Pay (MWE); 32 13th Month Pay and Other Benefits (maximum of P90,000) (432.00); 33 Deminimis Benefits 692.31; 34 SSS, GSIS, PHIC & Pag-ibig Contributions & Union Dues (Employee Share only) 538.00; 35 Salaries & Other Forms of Compensation 1,125.05; 36 Total Non-Taxable/Exempt Compensation Income (Sum of Items 27 to 35) 1,923.36; B. TAXABLE COMPENSATION INCOME REGULAR: 37 Basic Salary 4,313.71; 38 Representation; 39 Transportation; 40 Cost of Living Allowance; 41 Fixed Housing Allowance; 42 Others (Specify); 42A; 42B; SUPPLEMENTARY: 43 Commission; 44 Profit Sharing; 45 Fees Including Director's Fees; 46 Taxable 13th Month Pay and Other Benefits 0.00; 47 Hazard Pay; 48 Overtime Pay; 49 Others (Specify); 49A 1,505.91; 49B; 50 Total Taxable Compensation Income (Sum of Items 37 to 49B) 5,819.62.

We declare, under the penalties of perjury, that this certificate has been made in good faith, verified by us, and to the best of our knowledge and belief, is true and correct pursuant to the provisions of the National Internal Revenue Code, as amended, and the regulations issued under authority thereof.

51 Joseph Victor S. Eugenio Present Employer/Authorized Agent Signature Over Printed Name; Date Signed; CONFORME: 52 Cabahug, Rhona Employee Signature Over Printed Name; Date Signed; Amount Paid; CTC No. of Employee; Place of Issue; Date of Issue.

To be accomplished under substituted filing: 53 Present Employer/Authorized Agent Signature Over Printed Name (Head of Accounting/Human Resources or Authorized Representative); 54 Cabahug, Rhona Employee Signature Over Printed Name.